

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10804794
FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3	1					
4	1					
5	1					
6	1					
7		1				
8		2				
9	2					
10	2					
11	2					
12	2					
13	2					
14	1					
15	1					
16	1					
17	1					
18		1				
19	1					
20	1					
21	1					
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23	1					
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36	1					
37		1				
38	1					
39		1				
40	1					
41	1					
42	1					
43		1				
44	1					
45	1					
46	1					
47	1					
48	1					
49		1				
50		1				

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

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	IND	DEP	IND	DEP	IND	DEP
51		1				
52		1				
53		1				
54		1				
55		1				
56		1				
57	1					
58	1					
59		1				
60		1				
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95		1				
96		1				
97		1				
98		1				
99		1				
100		1				

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

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